## RECEIVED CENTRAL FAX CENTER

FROM FAEGRE & BENSON

(TUE) 6. 6'06 16:02/ST. 15:58/NO. 4862059141 P 11 JUN 0 6 2006 F&B (08-05) SB/22 (12-04) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) FY 2005 59013 - 331610 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)) **CLIFTON A. ALFERNESS** In re Application of Application Number 10/668,460 Filed September 23, 2003 CARDIAC REINFORCEMENT DEVICE **Art Unit** 3762 Examiner GETZOW, Scott M This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee **Small Entity Fee** \$60 One month (37 CFR 1.17(a)(1)) \$120 \$225 ▼ Two months (37 CFR 1.17(a)(2)) \$225 \$450 ☐ Three months (37 CFR 1.17(a)(3)) \$510 \$1020 ☐ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 ☐ Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. ☑ Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. In the Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 06-0029. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the ☐ applicant/inventor. ☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ☑ attorney or agent of record. Registration Number 52,079 ☐ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. June 6, 2006 Signature Date Brian W. Oberst 612-766-7174 Typed or printed name Telephone Number

R6/R7/2986 TI 0111 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

01 FC:2252

225.89 OP

more than one signature is required, see below. Total of 1 forms are submitted.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if